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| Application Number     | 10/668 049  |
| Filing Date            | 9/22/2003   |
| First Named Inventor   | THEEL, Julia                                      |
| Title                  | Disorderly Canine Appearance<br>Device and Method |
| Art Unit               | 3711  |
| Examiner Name          | HYLINSKI, Alyssa Marie                            |
| Attorney Docket Number | Theel.PatTay                                      |

I hereby revoke all previous powers of attorney given in the above-identified application.

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23616

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☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/99)

## **SIGNATURE of Applicant or Assignee of Record**

|                   |                    |           |          |
|-------------------|--------------------|-----------|----------|
| Signature         | <i>Julie Theel</i> | Date      | 7/3/2009 |
| Name              | Julie Theel        | Telephone | N/A      |
| Title and Company | N/A                |           |          |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.

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